TEXAS JUVENILE JUSTICE DEPARTMENT
OUT-OF-COUNTY STUDENT FORM

STUDENT NAME: _____ **SOCIAL SECURITY NUMBER:** _____

DATE OF BIRTH: _____

NINE DIGIT ID NUMBER OF EXPELLING SCHOOL DISTRICT/CAMPUS : _____
(COUNTY/DISTRICT/CAMPUS)

EXPULSION OFFENSE CITE: (CHECK APPLICABLE BOX)

- ☐ 37.007A1A FIREARM
- ☐ 37.007A1B ILLEGAL KNIFE
- ☐ 37.007A1C CLUB
- ☐ 37.007A1D PROHIBITED WEAPON
- ☐ 37.007A2A AGG. ASSLT, AGG. SEX ASSLT, SEX ASSLT.
- ☐ 37.007A2B ARSON
- ☐ 37.007A2C MURDER, CAPITAL MURDER, ATT. MURDER
- ☐ 37.007A2D INDECENCY WITH A CHILD
- ☐ 37.007A2E AGGRAVATED KIDNAPPING
- ☐ 37.007A2F AGGRAVATED ROBBERY
- ☐ 37.007A2G MANSLAUGHTER
- ☐ 37.007A2H CRIMINALLY NEGLIGENT HOMICIDE
- ☐ 37.007A3 FELONY DRUG
- ☐ 37.007D RETALIATION
- ☐ 37.007E FEDERAL FIREARM

PROJECTED NUMBER OF ATTENDANCE DAYS: _____

DATE EXPULSION TERMINATES: _____

FUNDING REQUESTED BY:

COUNTY NAME: _____

TJJD USE ONLY

DATE REQUEST RECEIVED: _____

APPROVED: ☐ **NUMBER OF DAYS APPROVED:** _____

Denied: ☐ **Reason for Denial:** _____

_____

STAFF: _____ **DATE:**_____

Return to:
TJJD, Attention Director of Education - JJAEP
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